PTO/SB/22 (10-04) Approved for use through 7/31/2006. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR		Docket Number (Optional)						
FY 2005		00138-02340-US						
(fees effective on or after October 1, 2004)								
Application Number 10/081628-Conf. #1917	Filed	February 20, 2002						
For PHOSPHORUS-CONTAINING POLYMERS FOR OPTICAL SIGNAL TRANSDUCERS								
Art Unit 1713	Examiner	Pezzuto, Helen Lee						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):								
Fe  X One month (37 CFR 1.17(a)(1)) \$110								
Two months (37 CFR 1.17(a)(2)) \$430	0.00 \$215.0	0 \$						
Three months (37 CFR 1.17(a)(3)) \$980	_	-						
Four months (37 CFR 1.17(a)(4)) \$1,53								
Five months (37 CFR 1.17(a)(5)) \$2,08								
1 1 Ve months (57 Cr (1.17(a)(5)) \$2,00	ψ1,0 <del>4</del> 0.0	· · · · · · · · · · · · · · · · · · ·						
Applicant claims small entity status. See 37 CFR 1.2	<b>77.</b>							
X A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached	l <b>.</b>							
The Director has already been authorized to charge	ees in this application to a	Deposit Account.						
The Director is hereby authorized to charge any fees	which may be required, or	r credit any overpayment, to						
Deposit Account Number 03-2775	I have enclosed a duplicat							
I am the applicant/inventor.								
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
attorney or agent of record. Registration Number								
x attorner on agent onder/37 CFR 1.34(a).								
Registration number it againg under 37		735						
1 1 1 With		11/17/04						
Signature Date								
J. Clay Matthews		(302) 658-9141 Telephone Number						
200								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total of forms are submitted								

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RELITE TRADENA	Under the Paperwork Reduction Act of 1995, no person are requ	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COI ired to respond to a collection of information unless it displays a valid OMB contro							
TRADENA	FEE TRANSMITTAL				Com	plete if Known			
·	FEE IKANSIVIIIIAL		Application Number		Number	10/081628-Conf. #1917			
	for FY 2005		Filing Date			February 20, 2002			
	Effective 10/01/2004. Patent fees are subject to annual revision.	First Named Inventor		d Inventor	Ingmar Dorn				
	Ellective rate (2007.2004. Facilities are subject to allinear revision.	Examiner Name		ame	Pezzuto, Helen Lee				
	Applicant claims small entity status. See 37 CFR 1.27	Art Unit			1713				
	TOTAL AMOUNT OF PAYMENT (\$) 110.00		Attorr	ney Do	cket No.	00138-02340-US			
METHOD OF PAYMENT (check all that apply)					FEE CALCL	JLATION (continued)			
	X Check Credit Money Other None  Deposit Account:		ADDITI		FEES				
	Deposit Account 03-2775	Fee	Fee	Fee	Fee	Foo Donadation			
	Number	Code	(\$)	Code	(\$)	Fee Description	Fee Pald		
	Deposit Account   Connolly Bove Lodge & Hutz LLP	1051	130	2051	65 Surcharge	e – late filing fee or oath			
	Name The Director is authorized to: (check all that apply)	1052	50	2052	25 Surcharge sheet.	e - late provisional filing fee or cover			
	Charge fee(s) indicated below X Credit any overpayments	1053	130	1053		ish specification			
		1812		1812		request for ex parte reexamination			
	X Charge any additional fee(s) or any underpayment of fee(s)  Charge fee(s) indicated below, except for the filing fee				Poguantie	ng publication of SIR prior to			
	to the above-identified deposit account.	1804	920*	1804	920* Examiner				
		1805	1,840*	1805	1,840* Requestir Examiner	ng publication of SIR after action			
	FEE CALCULATION	1251	110	2251		for reply within first month	\$110.00		
	1. BASIC FILING FEE	1252	430	2252		for reply within second month			
	Large Entity Small Entity  Fee Fee Fee Fee Fee Description Fee Paid	1253	980	2253		for reply within third month	$\vdash$		
	Code (\$) Code (\$)	1254	1,530	2254		n for reply within fourth month			
	1001 790 2001 395 Utility filing fee	1255	2,080	2255		for reply within fifth month	<u> </u>		
	1002 350 2002 175 Design filing fee 1003 550 2003 275 Plant filing fee	1401	340 340	2401	170 Notice of 170 Filing a br	Appear			
	1004 790 2004 395 Reissue filing fee	1403	300	2403	•	or oral hearing			
	1005 160 2005 80 Provisional filing fee	1451	1,510	1451	· ·	institute a public use proceeding			
	SUBTOTAL (1) (\$) 0.00	1452 110 2452 55 Petition to			55 Petition to	revive – unavoidable			
	002.017.2(1) (0) 0.00	1453 1,370 2453 685 Petiti			685 Petition to	revive - unintentional			
	2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from			2501	•	ue fee (or reissue)	<u> </u>		
	Claims below Fee Paid	1502	490	2502	245 Design is:				
	Total Claims	1503	660	2503	330 Plant issu				
	Claims X	1460	130	1460		to the Commissioner			
	Multiple Dependent	1807	50	1807		ng fee under 37 CFR 1.17(q)			
	Large Entity   Small Entity   Fee   Fee   Fee   Fee	1806	180	1806	Pecordine	on of Information Disclosure Stmt g each patent assignment per			
	Code (\$) Code (\$) Fee Description	8021	40	8021	property (	times number of properties)			
	1202 18 2202 9 Claims in excess of 20	1809	790	2809	395 Filing a su (37 CFR	ubmission after final rejection 1.129(a))			
	1201 88 2201 44 Independent claims in excess of 3 1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	305 For each	additional invention to be			
	1204 88 2204 44 ** Reissue independent claims	1801	790	2801		I (37CFR 1.129(b)) for Continued Examination (RCE)	$\vdash$		
	over original patent	1802	900	1802	900 Request f	or expedited examination			
	1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		fee (spe	ı	of a desig	n application			
	SUBTOTAL (2) (\$) 0.00	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110.00							
**or number previously paid, if greater; #or Reissues, see above									
	SUBMITTED BY	Renist	ration No		700	(Complete (if applicable))			
	Name (Print/Type) J. Clay Matthews		ey/Agent)		,735	Telephone (302) 658-9141			
	Signature / WIX					Date // / / / /	14		